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Substitute for Form PTO-875

Application or Docket Number

10-726,367

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR		NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.18(a), (b), or (c))			
SEARCH FEE (37 CFR 1.18(k), (l), or (m))			
EXAMINATION FEE (37 CFR 1.18(o), (p), or (q))			
TOTAL CLAIMS (37 CFR 1.18(l))		minus 20 = *	*
INDEPENDENT CLAIMS (37 CFR 1.16(h))		minus 3 = *	*
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))			

OR

SMALL ENTITY		SMALL ENTITY	
RATE (\$)	FEE (\$)	RATE (\$)	FEE (\$)
X	=	X	=
X	=	X	=
TOTAL		TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

* If the difference in column 1 is less than zero, enter "0" in column 2

APPLICATION AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

On

OTHER THAN
SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY		SMALL ENTITY	
	Total (37 CFR 1.16(f))	*	Minus	**	=	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)
	Independent (37 CFR 1.16(f))	*	Minus	***	=	✓ =		OR	✓ =
	Application Size Fee (37 CFR 1.16(s))					✓ ** =		OR	✓ =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.16(d))							OR	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

1.9.06

(C6: מחזור 7)

(Column 2)

1960. 1961. 1962.

AMENDMENT 8

CLAIMS

HIGHEST

2018

ADD.

DATE (S)

ADCU

AMENDMENT B	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT ENTRY		RATE (\$)		ADDITIONAL FEE (\$)		RATE (\$)		ADDITIONAL FEE (\$)	
	Total: (37 CFR 1.16(a))	52	Minus	53	—									
Independent (37 CFR 1.16(b))	5	Minus	5	—										
Application Size Fee (37 CFR 1.16(f))														
FIRST PRESENTATION MULTIPLE DEPENDENT CLAIM														
<div> <div> TOTAL APPL. FEE </div> <div> TOTAL APPL. FEE </div> </div>														

* If the entry in column 1 is less than the entry in column 2, write 0 in column 3.

.. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 21, enter

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter:
The "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter:

The "Highest Number Previously Paid For" (Total or Independent), is the highest number found in the appropriate box or boxes.

This collection of information is required by 37 CFR 1.15. The information reported here will remain confidential if the inventor's name is withheld by the USPTO to process an application. Confidentiality is governed by 38 U.S.C. 491(a)(2) and 37 C.F.R. 1.101(c). This form does not constitute an extension of time for filing or prosecution of an application. It must be submitted to complete the application file. Failure to submit this form may result in the application being considered abandoned. Please refer to the instructions on the back of this form for more details. If you are submitting this form as part of a submission to the Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, please send it to the same address.

ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450 Alexandria VA 22313-1450

If you need assistance in any of the above areas, please contact your local extension office.